## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for n

ndicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the			
Colorest of Portices Appreciations, One Disease I to any change of Budges)					Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
22807	7590 01	/13/2006			па				
GREENSFELDER HEMKER & GALE PC SUITE 2000 10 SOUTH BROADWAY					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
ST LOUIS, MO	53102							(Depositor's name)	
					L			(Signature)	
					L			(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/787,117 FITLE OF INVENTION:	02/27/200 LADDER SAFETY		•	Allan Jame	es Becker		WH-11959US	5081	
APPLN. TYPE	SMALL ENT	ITY ISS	SUE FEE		PUBL	ICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1400		\$300		\$1700	04/13/2006	
EXAMINER			ART UNIT			S-SUBCLASS	7		
THOMPS	THOMPSON, HUGH B				18	2-106000	000		
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG BRAND SERVI	ess an assignee is id in 37 CFR 3.11. Co INBE ICES, INC.		nee d NOT	ata will appe a substitute t (B) RESIDE	ear on the for filing a NCE: (CIT HESTE	patent. If an assignment. Y and STATE OR	SOURI		
ta. The following fee(s) are enclosed:  4b. Alssue Fee  Publication Fee (No small entity discount permitted)					Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
	SMALL ENTITY s	tatus. See 37 CFR 1.27.				-	ALL ENTITY status. See 37 C		
The Director of the USPT NOTE: The Issue Fee and interest as shown by the re	O is requested to ap l Publication Fee (if ecords of the United	ply the Issue Fee and Pul required) will not be acc States Patent and Trader	olicati epted nark (	on Fee (if an from anyone Office.	y) or to re- other than	apply any previou the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature				Date					
Typed or printed name									
tiekandria, virginia 223 i	3-1430.						y the public which is to file (an 2 minutes to complete, includi comments on the amount of ti d Trademark Office, U.S. Dep SS. SEND TO: Commissioner it displays a valid OMB contro		
<del></del>	<u>-</u>								
	3/31/2006	00000122	1	15		\$1,400.00		CK	
PTOI-85 (Rev 01/06) (	13/31/2006	00000123	1	15	U4	\$300.00	03/30/2006	CK COMMERCE	